

# SEGUIN POLICE DEPARTMENT



## MISSION STATEMENT

*“To provide professional law enforcement service to the citizens and guests of Seguin through a proactive approach to crime, partnership with the community and a commitment to service.”*

## CORE VALUES

### **O.U.R. S.P.D.**

Order, Understanding, Respect, Service, Pride, Dedication

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## REQUIREMENTS

**Before you begin to fill out this personal history statement, please ensure that you meet the following requirements. You must meet all five of these requirements to qualify for licensure as a peace officer in Texas.**

- ☐ I am a citizen of the United States of America
- ☐ I have earned a high school diploma or a GED.
- ☐ I have never been convicted, plead guilty (nolo contendere), nor have I been on court-ordered community service/probation or deferred adjudication for a Class A misdemeanor or felony.
- ☐ During the last ten (10) years, I have not been convicted, plead guilty (nolo contendere), been on community service/probation or deferred adjudication for a Class B misdemeanor in this state, other state, or while serving in the military.
- ☐ I have never had a military court martial that resulted in a dishonorable or bad conduct discharge

### DISQUALIFICATION

**There are very few automatic basis for rejection. Even issues or prior misconduct, employee terminations, and arrests are usually not, in and of themselves, automatically disqualifying. However, deliberate misstatements or omissions can and often will result in your application being rejected, regardless of the nature or reason for the misstatements/omissions. In fact, the number one reason individuals “fail” background investigations is because they deliberately withhold or misrepresent job-relevant information from their prospective employer.**

*This personal history statement is a governmental document. Be truthful, as there are criminal consequences for lying on a governmental document.*

### Disclosure of Medically-Related Information

In accordance with the U.S. Americans with Disabilities Act, at this stage of the hiring process applicants are not expected or required to reveal any medical or other disability-related information about themselves in response to questions on this form, or to any other inquiry made prior to receiving a conditional offer of employment.

## INSTRUCTIONS

### READ CAREFULLY BEFORE PROCEEDING!

These instructions are provided as a guide to assist you in properly completing your Personal History Statement (PHS). It is essential that the information be **accurate and complete** in all respects. YOU are responsible for accurate and thorough completion of this document.

Deadline violations, omissions, falsifications or failures to follow instructions **WILL AUTOMATICALLY DISQUALIFY YOU** as a candidate for this position. This information will be used as the basis for the background investigation that will determine your eligibility for employment.

1. Avoid any errors by reading the directions carefully before making any entries on the form.
2. Be sure your information is correct and in proper sequence before you begin. Begin your employment history with your most current position working backward. List all periods of unemployment in the spaces provided on the Employment History pages.
3. Your PHS must be **printed** legibly in **black** ink, not typewritten, by **YOU** and no other person.
4. Answer all questions completely and accurately. If a question is not applicable to you, enter N/A in the space provided; **do not leave any blanks**.
5. If there is insufficient space on the form for you to include all required information, attach extra sheets to the PHS or write information on the additional information pages 64-68. Be sure to reference the relevant section and question number before continuing your answer.
6. You are responsible for obtaining correct names, addresses and telephone numbers. If you are not sure of an address or telephone number, check it by personal verification.
7. Make sure you turn in everything applicable to you from the "Required Documents Checklist". Failure to do so will result in rejection of your application.

**NOTE: BE ADVISED THAT WHEN TURNING IN YOUR PACKET, NO ONE WILL CHECK YOUR PACKET FOR COMPLETENESS. THAT IS YOUR RESPONSIBILITY.**

**Due Date: Due prior to the written test.**

## REQUIRED DOCUMENTS CHECKLIST

The following list represents the documentation which must accompany your Personal History Statement and **MUST** be turned in with your packet. This information is needed in the event a background investigation is conducted.

**Items 1-20 MUST be turned in with your packet at the time of successfully completing written test.**

1. ☐ Copy of current Driver's License (Note: Applicant must have Texas Driver's License before employment).
2. ☐ Copy of Social Security Card
3. ☐ Copy of Birth Certificate (certified copy from State/County where born)
4. ☐ Copy of Naturalization Papers (if applicable)
5. ☐ Authority to Release Information form (Notarized)
6. ☐ Pre-Employment Inquiry Release Form
7. ☐ Fair Credit Reporting Act Applicant Notice and Authorization
8. ☐ Copy of DD-214 Member copy 4 if applicable
9. ☐ Current Photograph of applicant
10. ☐ Copy of current Credit Report (within last 30 days)
11. ☐ Copy of High School Transcript(s) – From all attended
12. ☐ Copy of College Transcript(s) – From all attended (if applicable). \*\*
13. ☐ Copy of all reports, documentation and disposition for any arrests, (if applicable).
14. ☐ Copy of All Marriage Licenses (if applicable)
15. ☐ Copy of All Divorce Decrees (if applicable)
16. ☐ Copy of Bankruptcy discharge papers (if applicable)
17. ☐ Copy of current Automobile Insurance
18. ☐ Copy of any T.C.O.L.E. certifications held (if applicable)
19. ☐ Copy of Child Support Orders (if applicable)
20. ☐ Copies of any Performance Evaluations and/or Discipline received

\*\*College transcripts must bear the seal of the institution.

I understand that in order to be considered for the next available Police Officer position, I must return the Personal History Statement packet accompanied by the necessary documentation to continue in the hiring process. I understand that I will be investigated for any criminal history and driving history throughout this hiring process. I understand that I am expected to participate in and successfully pass any and all drug screening.

I understand that I am responsible for notifying the Seguin Police Department recruiter or background investigator of any changes of my status (get married/divorced, change jobs, address, phone number) or if I have any contact with law enforcement (stopped for traffic violations, arrest, or made a call for police service).

**WRITTEN email notice must be made within 10 days of the change or law enforcement contact to Sgt. Jim Springer at email: [jspringer@seguintexas.gov](mailto:jspringer@seguintexas.gov).** Phone calls will **NOT** be accepted as notice of change or law enforcement contact.

I affirm that the answers I have made to each and all of the foregoing questions are complete and true to the best of my knowledge and belief; and the falsification, misrepresentation, or omission of any information may be just cause for the rejection of this application; or if hired, may be used as a basis for dismissal.

I understand that I may participate in several applicant assessments (see below) and these assessments will require applicants to read English and understand oral instructions. (If special assistance, modification or equipment is required to take these assessments, please specify in the space below.)

Special Requirements:

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Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

### **Police Officer Process**

The different phases of the Police Officer Process for the City of Seguin are as follows. The applicant **must** pass each phase of the process to continue to the next phase.

#### APPLICATION

1. City of Seguin application completed on-line.

#### INITIAL TESTING

2. Written Test

#### PERSONAL HISTORY STATEMENT

3. Complete and return Personal History Statement

#### ORAL BOARD

4. Oral Board

#### BACKGROUND

5. Background Investigation

#### CHIEF'S MEETING (optional)

6. Meeting with Chief

#### FINAL TESTING UPON RECEIVING A CONDITIONAL OFFER

7. Drug Screen
8. Polygraph Testing
9. Psychological Testing
10. Medical/Physical Examination

## APPLICANT PHOTOGRAPH



In the space provided above, attach a **recent, full length photograph** of yourself. Attach the photograph with tape or paste. Also, write your full name and date of birth on the back of the photograph. Photos will NOT be returned to applicant.

Name: \_\_\_\_\_

Last

First

Middle





## EDUCATION HISTORY

### **HIGH SCHOOL –list all attended**

Name	City/State	Dates Attended	Did you graduate?
<hr/>			
<hr/>			
<hr/>			

1. Yes ☐ No ☐

Did you graduate from High School with a diploma? If you did not graduate, explain in detail. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Yes ☐ No ☐

Did you receive a G.E.D.? If yes, give date and place of G.E.D.

\_\_\_\_\_

3. Yes ☐ No ☐

Have you ever been suspended from any school? If yes, give dates, schools and reason for suspension. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Yes ☐ No ☐

Have you ever been expelled from any school? If yes, give dates, schools and reason for expulsion. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Yes ☐ No ☐

Have you ever been placed on academic probation from any school? If yes, give dates, names of schools and reason for probation.

\_\_\_\_\_

\_\_\_\_\_

## COLLEGE OR UNIVERSITY

1. Yes ☐ No ☐

Are you presently attending college? If yes, what is your major?

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2. Yes ☐ No ☐

Have you earned a degree? If yes, list degree earned and date received.

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3. Yes ☐ No ☐

Do you plan on completing your degree? If yes, estimated date of completion and degree you should receive.

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List all colleges, police academies, technical or trade schools you have attended, regardless of whether you graduated and/or completed the prescribed course of study.

<u>School Attended</u>	<u>City/State</u>	<u>Hrs. Earned</u>	<u>Dates Attended</u>	<u>GPA</u>
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List any foreign languages you speak:

<u>Language</u>	<u>Degree of fluency</u>
	Read/Write: <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Excellent
	Speak: <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Excellent
	Read/Write: <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Excellent
	Speak: <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Excellent

## MILITARY

1. Yes ☐ No ☐ Did you register for the Selective Service (draft) at the age of 18?  
(Males only)  
If not, explain why: \_\_\_\_\_
2. Yes ☐ No ☐ Have you ever applied to serve in any branch of the armed forces?
3. Yes ☐ No ☐ Have you ever applied for and been rejected for military  
service? If so, give dates and explain why? \_\_\_\_\_  
\_\_\_\_\_
4. Yes ☐ No ☐ Have you ever served in the armed forces? If no, please skip to page 12.

**If you served in multiple enlistments or different branches, complete this and the next Military page for each branch and/or enlistment.**

Enlistment date or date applied: \_\_\_\_\_ Discharge date: \_\_\_\_\_

Branch of Service: \_\_\_\_\_ Unit designation: \_\_\_\_\_

Highest rank held: \_\_\_\_\_ Re-Entry Code (refer to DD-214): \_\_\_\_\_

Type of discharge: ☐ Entry Level ☐ Honorable ☐ General ☐ OTH (Other Than Honorable)

If you originally received an "Other than Honorable" discharge, give complete details.  
\_\_\_\_\_  
\_\_\_\_\_

Did you ever receive any of the following, regardless of final disposition?

- |   |  |
|---|--|
| 5. Yes <input type="checkbox"/> No <input type="checkbox"/> Article XV  | 6. Yes <input type="checkbox"/> No <input type="checkbox"/> Court Martial        |
| 7. Yes <input type="checkbox"/> No <input type="checkbox"/> Captain's Mast  | 8. Yes <input type="checkbox"/> No <input type="checkbox"/> Company's Punishment |
| 9. Yes <input type="checkbox"/> No <input type="checkbox"/> Confinement   | 10. Yes <input type="checkbox"/> No <input type="checkbox"/> Letter of Reprimand |
| 11. Yes <input type="checkbox"/> No <input type="checkbox"/> Reduction in rank, officer hours, other written reprimand, or any other disciplinary action? |  |

If you answered yes to any of the above, give **complete** details, including date, charge, circumstances, disposition, etc. for each disciplinary incident.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**MILITARY CONTINUED**

12. Yes ☐ No ☐ Have you listed all disciplinary action you received in the military?
13. Yes ☐ No ☐ Are you currently a member of the U.S. Reserve, National or State Guard organizations? If yes, list here: \_\_\_\_\_  
Date Obligation Ends: \_\_\_\_\_
14. Yes ☐ No ☐ Have you listed your entire military history, including reserve duties?
15. Yes ☐ No ☐ Have you included all information requested for each branch of service?
16. Yes ☐ No ☐ Have you ever stolen or not returned any government property during your military service? If yes, give dates and explain in detail:  
\_\_\_\_\_  
\_\_\_\_\_
17. Yes ☐ No ☐ Were you ever sent to another country during your service for any reason? If yes, list all, give dates and explain why. \_\_\_\_\_  
\_\_\_\_\_
18. Yes ☐ No ☐ Did you supervise others while in the military? If so, in what capacity? Give dates and explain: \_\_\_\_\_
19. Yes ☐ No ☐ Were you discharged prior to the end of your tour of duty? If yes, give dates and explain in detail: \_\_\_\_\_  
\_\_\_\_\_
20. Yes ☐ No ☐ Were you ever reduced in rank? If yes, give dates and explain in detail.  
\_\_\_\_\_
21. Yes ☐ No ☐ Were you ever denied a security clearance, or had a clearance revoked, suspended or downgraded, either military or any other federal, state or municipal clearance?  
If so, give dates and explain in detail: \_\_\_\_\_  
\_\_\_\_\_
22. Yes ☐ No ☐ Were you ever awarded any commendations or medals while in the military? If so, give dates and explain circumstances: \_\_\_\_\_  
\_\_\_\_\_

## DRIVING HISTORY

List all traffic citations (excluding parking tickets) you have ever received, regardless of disposition.

Date issued	Charge(s)	Issuing Agency	Disposition

List all traffic accidents you have been involved in *regardless* of whether you were at fault or not.

Date	Location (City/State)	At Fault? Y/N	Police Report? Y/N	Police Agency

List every driver's license you have ever been issued including State, Federal, Military, Etc.

Issuing Entity/State	Driver's License Number	Expiration Date

1. Yes ☐ No ☐

Has your driver's license ever been suspended or revoked in any state? If yes, give details about every suspension/revocation.

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**DRIVING HISTORY CONTINUED**

2. Yes ☐ No ☐ Have you ever driven a vehicle without financial responsibility (automobile liability insurance)? If yes, give dates and explain:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. Yes ☐ No ☐ Have you ever been referred to a medical advisory board? If so, give dates and explain: \_\_\_\_\_
4. Yes ☐ No ☐ Have you ever had your insurance policy revoked or cancelled? If yes, explain in detail. \_\_\_\_\_  
\_\_\_\_\_
5. Yes ☐ No ☐ Have you ever been involved in a motor vehicle accident and left the scene without identifying yourself? If yes, give dates and explain in detail and indicate if any party involved or witnesses notified the police.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Yes ☐ No ☐ Have you ever been refused a driver's license by any state? If so, explain (include dates, where and circumstances) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Yes ☐ No ☐ Do you currently have Automobile Liability Insurance? If not, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Answer the following questions regarding Automobile Liability Insurance:**

Insurance Company: \_\_\_\_\_

Insurance Co. Address: \_\_\_\_\_

Insurance Co. Phone Number: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Name(s) on Policy: \_\_\_\_\_

Effective Dates on Policy: \_\_\_\_\_

## FINANCIAL HISTORY

What is your total monthly net (take home) income from your current job? \$\_\_\_\_\_

1. Yes ☐ No ☐

Do you have income from any other sources other than your principal occupation? This could include income from other members of your household, child support, alimony, dividends, rental property, part-time jobs, spouse, etc. If yes, what is your monthly income from all of these sources?  
\$\_\_\_\_\_

2. Yes ☐ No ☐

Have you ever filed for bankruptcy? If yes, list the date of filing, date of discharge, amount of discharge and type of bankruptcy (Chapter 7, 11, 13, etc.), County/Court where filed\_\_\_\_\_

List the name and address of **all** individuals, companies, banks or businesses to whom you and your spouse owe/make payments such as rent, mortgage, auto payment, insurance, charge accounts, child support, child care, etc. Also include regular services for which you pay such as utilities, cellular phone, cable/satellite, alarm monitoring, etc.

[illegible]

Total Monthly Debt: \$

## MARITAL AND FAMILY HISTORY

Indicate your marital status:

Single ☐ Married ☐ Separated ☐ Engaged ☐ Divorced ☐ Widowed ☐ Common Law ☐

### IF CURRENTLY MARRIED – SPOUSE'S INFORMATION

Name: \_\_\_\_\_  
Last First Middle

Maiden Name (If Applicable): \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth: \_\_\_\_\_  
State/Country

Residence Address: \_\_\_\_\_  
City State Zip

Date of Marriage: \_\_\_\_\_ Location: \_\_\_\_\_  
City/State/County

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Address of Employment: \_\_\_\_\_

**Fiancée** ☐ **Girlfriend/Boyfriend** ☐ **Domestic Partner** ☐

Name: \_\_\_\_\_  
Last First Middle

Maiden Name (If Applicable): \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth: \_\_\_\_\_  
State/Country

Residence Address: \_\_\_\_\_  
City State Zip

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Address of Employment: \_\_\_\_\_



**IF DIVORCED – (List ALL divorces)**

(1). Date of Marriage: \_\_\_\_/\_\_\_\_/\_\_\_\_ Location: \_\_\_\_\_  
City/State/County

Date of Divorce: \_\_\_\_/\_\_\_\_/\_\_\_\_ Location: \_\_\_\_\_  
City/State/County

Ex-Spouse Full (Maiden) Name:

Last	First	Middle	Maiden
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Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth: \_\_\_\_\_  
City/State/Country

Residence Address: \_\_\_\_\_

City	State	Zip
------	-------	-----

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

(2). Date of Marriage: \_\_\_\_/\_\_\_\_/\_\_\_\_ Location: \_\_\_\_\_  
City/State/County

Date of Divorce: \_\_\_\_/\_\_\_\_/\_\_\_\_ Location: \_\_\_\_\_  
City/State/County

Ex-Spouse Full (Maiden) Name:

Last	First	Middle	Maiden
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Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth: \_\_\_\_\_  
City/State/Country

Residence Address: \_\_\_\_\_

City	State	Zip
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Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## CHILDREN AND DEPENDENTS

Please list all children and dependents you have been or are responsible for below, regardless of whether they are natural, step-children, adopted or foster.

Name: \_\_\_\_\_  
Last First Middle

Date of Birth: \_\_\_\_\_ Relationship: \_\_\_\_\_

1. Yes ☐ No ☐ Does this child live at your present address? If not, list address.

\_\_\_\_\_  
\_\_\_\_\_

---

Name: \_\_\_\_\_  
Last First Middle

Date of Birth: \_\_\_\_\_ Relationship: \_\_\_\_\_

2. Yes ☐ No ☐ Does this child live at your present address? If not, list address.

\_\_\_\_\_  
\_\_\_\_\_

---

Name: \_\_\_\_\_  
Last First Middle

Date of Birth: \_\_\_\_\_ Relationship: \_\_\_\_\_

3. Yes ☐ No ☐ Does this child live at your present address? If not, list address.

\_\_\_\_\_  
\_\_\_\_\_

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Name: \_\_\_\_\_  
Last First Middle

Date of Birth: \_\_\_\_\_ Relationship: \_\_\_\_\_

4. Yes ☐ No ☐ Does this child live at your present address? If not, list address.

\_\_\_\_\_  
\_\_\_\_\_

**CHILDREN AND DEPENDENTS CONTINUED**

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Name: \_\_\_\_\_  
Last First Middle

Date of Birth: \_\_\_\_\_ Relationship: \_\_\_\_\_

5. Yes ☐ No ☐ Does this child live at your present address? If not, list address.

\_\_\_\_\_  
\_\_\_\_\_

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Name: \_\_\_\_\_  
Last First Middle

Date of Birth: \_\_\_\_\_ Relationship: \_\_\_\_\_

6. Yes ☐ No ☐ Does this child live at your present address? If not, list address.

\_\_\_\_\_  
\_\_\_\_\_

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Name: \_\_\_\_\_  
Last First Middle

Date of Birth: \_\_\_\_\_ Relationship: \_\_\_\_\_

7. Yes ☐ No ☐ Does this child live at your present address? If not, list address.

\_\_\_\_\_  
\_\_\_\_\_

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Name: \_\_\_\_\_  
Last First Middle

Date of Birth: \_\_\_\_\_ Relationship: \_\_\_\_\_

8. Yes ☐ No ☐ Does this child live at your present address? If not, list address.

\_\_\_\_\_  
\_\_\_\_\_

## **FAMILY**

List immediate family members of both yourself and your spouse (father, mother, brothers and sisters, and also include step-father(s), step-mother(s), step-brother(s) and step-sister(s). If deceased, indicate year and month of death. If not applicable, write N/A under name section.

### **A. Father**

Name: \_\_\_\_\_ DOB \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_  
Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

### **B. Step-Father**

Name: \_\_\_\_\_ DOB \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_  
Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

### **C. Mother (Include Maiden name)**

Name: \_\_\_\_\_ DOB \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_  
Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

### **D. Step-Mother (Include Maiden name)**

Name: \_\_\_\_\_ DOB \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_  
Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

### **E. Father-In-Law**

Name: \_\_\_\_\_ DOB \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_  
Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

### **F. Mother-In-Law (Include Maiden Name)**

Name: \_\_\_\_\_ DOB \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_  
Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

### **G. Brother**

Name: \_\_\_\_\_ DOB \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_  
Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

### **H. Brother**

Name: \_\_\_\_\_ DOB \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_  
Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

## **FAMILY CONTINUED**

### I. Sister

Name: \_\_\_\_\_ DOB \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_  
Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

### J. Sister

Name: \_\_\_\_\_ DOB \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_  
Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

### K. Step-Brother

Name: \_\_\_\_\_ DOB \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_  
Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

### J. Step-Brother

Name: \_\_\_\_\_ DOB \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_  
Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

### L. Step-Sister

Name: \_\_\_\_\_ DOB \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_  
Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

### M. Step-Sister

Name: \_\_\_\_\_ DOB \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_  
Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

### N. Additional family (list relationship) \_\_\_\_\_

Name: \_\_\_\_\_ DOB \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_  
Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

### O. Additional family (list relationship) \_\_\_\_\_

Name: \_\_\_\_\_ DOB \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_  
Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

### P. Additional family (list relationship) \_\_\_\_\_

Name: \_\_\_\_\_ DOB \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_  
Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

**FAMILY CONTINUED**

Q. Additional family (list relationship) \_\_\_\_\_

Name: \_\_\_\_\_ DOB \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

R. Additional family (list relationship) \_\_\_\_\_

Name: \_\_\_\_\_ DOB \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

S.. Additional family (list relationship) \_\_\_\_\_

Name: \_\_\_\_\_ DOB \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

Work Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

1. Yes ☐ No ☐

Has any member of your family, including in-laws ever been summoned into court for a criminal act, or been arrested/charged/convicted of any crime? If yes, list each person's full name, date of birth, charge(s), date occurred, arresting agency and disposition.

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2. Yes ☐ No ☐

Do you currently share a residence with anyone other than a family member? If yes, list each person's full name, relationship, occupation and work telephone number.

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## EMPLOYMENT HISTORY

**BEGIN WITH CURRENT EMPLOYMENT AND WORK BACKWARD. LIST EVERY JOB and PERIOD OF UNEMPLOYMENT YOU HAVE EVER HAD.**

Unemployment Dates: From \_\_\_\_\_ to \_\_\_\_\_

If unemployed, list dates and check reason.

Reason for Unemployment: ☐ Student ☐ Between Jobs ☐ Leave of Absence ☐ Travel ☐ Other

Employment Dates: From \_\_\_\_\_ To \_\_\_\_\_  
month/day/year month/day/year

Employer: \_\_\_\_\_ Final Salary: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Supervisor email address: \_\_\_\_\_

Co-worker Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Full Time ☐ Part-Time ☐ Temporary ☐ Seasonal ☐ Reserve  
Position ☐ Internship ☐ Self-employed ☐ Other ☐

Job Title: \_\_\_\_\_ Main Duties: \_\_\_\_\_

1. Yes ☐ No ☐ Did you receive any type of written performance evaluation? **If so, provide copies to background investigator.**

Reason for Leaving: \_\_\_\_\_

Nature of Separation: ☐ Resigned with notice – How much notice given? \_\_\_\_\_  
☐ Fired ☐ Resigned without notice ☐ Laid Off

If you resigned without notice, were fired or laid off, explain why in detail: \_\_\_\_\_

2. Yes ☐ No ☐ Was the amount of notice given in agreement with company policy?

3. Yes ☐ No ☐ If resigned, was the resignation an alternative to termination or other disciplinary action? If yes, explain in detail: \_\_\_\_\_

4. Yes ☐ No ☐ Did you ever receive **any** verbal counseling, written reprimand, or discipline on this job? If yes, give dates and explain in detail. \_\_\_\_\_

5. Yes ☐ No ☐ Are you eligible for re-hire? If not, explain in detail. \_\_\_\_\_



## **EMPLOYMENT HISTORY CONTINUED**

Unemployment Dates: From \_\_\_\_\_ to \_\_\_\_\_

If unemployed, list dates and check reason.

Reason for Unemployment: ☐ Student ☐ Between Jobs ☐ Leave of Absence ☐ Travel ☐ Other

Employment Dates: From \_\_\_\_\_ To \_\_\_\_\_  
month/day/year month/day/year

Employer: \_\_\_\_\_ Final Salary: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Supervisor: \_\_\_\_\_

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If unemployed, list dates and check reason.

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Unemployment Dates: From \_\_\_\_\_ to \_\_\_\_\_  
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## REFERENCES

In the spaces below, list the person who you consider to be your best friend. On the next 2 pages, list at least 7 persons who know you well enough to provide current information. **DO NOT** list relatives and former employers. Your **best friend CAN NOT** be listed as one of the 7 references.

### **BEST FRIEND REFERENCE**

Name: \_\_\_\_\_  
Last First Middle Maiden

Residence: \_\_\_\_\_

City State Zip

Occupation: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How did you meet this person? \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

### **REFERENCE #1**

Name: \_\_\_\_\_  
Last First Middle Maiden

Residence: \_\_\_\_\_

City State Zip

Occupation: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How did you meet this person? \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

---

**REFERENCE #2**

Name: \_\_\_\_\_  
Last First Middle Maiden

Residence: \_\_\_\_\_

\_\_\_\_\_  
City State Zip

Occupation: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How did you meet this person? \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

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**REFERENCE #3**

Name: \_\_\_\_\_  
Last First Middle Maiden

Residence: \_\_\_\_\_

\_\_\_\_\_  
City State Zip

Occupation: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How did you meet this person? \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

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**REFERENCE #4**

Name: \_\_\_\_\_  
Last First Middle Maiden

Residence: \_\_\_\_\_

\_\_\_\_\_  
City State Zip

Occupation: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How did you meet this person? \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

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**REFERENCE #5**Name: \_\_\_\_\_  
Last First Middle Maiden

Residence: \_\_\_\_\_

\_\_\_\_\_  
City State Zip

Occupation: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How did you meet this person? \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

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**REFERENCE #6**Name: \_\_\_\_\_  
Last First Middle Maiden

Residence: \_\_\_\_\_

\_\_\_\_\_  
City State Zip

Occupation: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How did you meet this person? \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

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**REFERENCE #7**Name: \_\_\_\_\_  
Last First Middle Maiden

Residence: \_\_\_\_\_

\_\_\_\_\_  
City State Zip

Occupation: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How did you meet this person? \_\_\_\_\_

How long have you known this person? \_\_\_\_\_



# CRIMINAL ACTIVITY

- 1.a. Yes ☐ No ☐ Have you **ever** been arrested as a juvenile? If so, list below and explain circumstances in detail on pages 63-67.
- b. Yes ☐ No ☐ Have you **ever** been arrested as an adult? If so, list below and explain circumstances in detail on pages 63-67.
2. Yes ☐ No ☐ Have you ever had any type of interaction with any law enforcement agency including the military? If so, explain circumstances in detail and what was the outcome? \_\_\_\_\_
3. Yes ☐ No ☐ Have you ever been summoned into court for any offense (or if in the military, court-martialed)? If so, explain circumstances in detail and what was the outcome? \_\_\_\_\_
4. Yes ☐ No ☐ Have you **ever** been charged with any offense or had a warrant issued for your arrest? If so, list below and explain circumstances in detail on pages 63-67.
- 5.a. Yes ☐ No ☐ Have you **ever** been convicted of, or pled guilty/no contest to a felony? If so, list below and explain circumstances in detail on pages 63-67.
- b. Yes ☐ No ☐ Have you **ever** been convicted of, or pled guilty/no contest to a misdemeanor? If so, list below and explain circumstances in detail on pages 63-67.
6. Yes ☐ No ☐ Have you **ever** been charged with an offense that was later reduced to a lesser offense? If so, list below and explain circumstances in detail on pages 63-67.

**If you were ever arrested, provide copies of the officer's reports and any additional court paperwork. If unable to obtain these records, explain why in detail, including who you talked to, the date you talked to them and their phone numbers.**

\_\_\_\_\_  
\_\_\_\_\_

**Below list each charge (what you were arrested for) separately, even if they occurred on the same day.**

**A. Original Charge** (What were you arrested for?) \_\_\_\_\_

Arresting Law Enforcement Agency and their address: \_\_\_\_\_  
Agency Name

Agency Address City State Zip

Arresting Law Enforcement Agency Phone Number: \_\_\_\_\_

Date of Arrest: \_\_\_\_\_ Were you handcuffed? \_\_\_\_\_ Transported in patrol car? \_\_\_\_\_

Was original charge reduced later? \_\_\_\_\_ If so, what was final charge? \_\_\_\_\_

What was final disposition of charge? (fines/probation/charges dismissed/community service, etc) Also give date of final disposition. \_\_\_\_\_

\_\_\_\_\_

**B. Original Charge** (What were you arrested for?) \_\_\_\_\_

Arresting Law Enforcement Agency and their address: \_\_\_\_\_  
Agency Name

Agency Address City State Zip

Arresting Law Enforcement Agency Phone Number: \_\_\_\_\_

Date of Arrest: \_\_\_\_\_ Were you handcuffed? \_\_\_\_\_ Transported in patrol car? \_\_\_\_\_

Was original charge reduced later? \_\_\_\_\_ If so, what was final charge? \_\_\_\_\_

What was final disposition of charge? (fines/probation/charges dismissed/community service, etc) Also give date of final disposition. \_\_\_\_\_

**C. Original Charge** (What were you arrested for?) \_\_\_\_\_

Arresting Law Enforcement Agency and their address: \_\_\_\_\_  
Agency Name

Agency Address City State Zip

Arresting Law Enforcement Agency Phone Number: \_\_\_\_\_

Date of Arrest: \_\_\_\_\_ Were you handcuffed? \_\_\_\_\_ Transported in patrol car? \_\_\_\_\_

Was original charge reduced later? \_\_\_\_\_ If so, what was final charge? \_\_\_\_\_

What was final disposition of charge? (fines/probation/charges dismissed/community service, etc) Also give date of final disposition. \_\_\_\_\_

**D. Original Charge** (What were you arrested for?) \_\_\_\_\_

Arresting Law Enforcement Agency and their address: \_\_\_\_\_  
Agency Name

Agency Address City State Zip

Arresting Law Enforcement Agency Phone Number: \_\_\_\_\_

Date of Arrest: \_\_\_\_\_ Were you handcuffed? \_\_\_\_\_ Transported in patrol car? \_\_\_\_\_

Was original charge reduced later? \_\_\_\_\_ If so, what was final charge? \_\_\_\_\_

What was final disposition of charge? (fines/probation/charges dismissed/community service, etc) Also give date of final disposition. \_\_\_\_\_

**E. Original Charge** (What were you arrested for?) \_\_\_\_\_

Arresting Law Enforcement Agency and their address: \_\_\_\_\_  
Agency Name

Agency Address City State Zip

Arresting Law Enforcement Agency Phone Number: \_\_\_\_\_

Date of Arrest: \_\_\_\_\_ Were you handcuffed? \_\_\_\_\_ Transported in patrol car? \_\_\_\_\_

Was original charge reduced later? \_\_\_\_\_ If so, what was final charge? \_\_\_\_\_

What was final disposition of charge? (fines/probation/charges dismissed/community service, etc) Also give date of final disposition. \_\_\_\_\_

**F. Original Charge** (What were you arrested for?) \_\_\_\_\_

Arresting Law Enforcement Agency and their address: \_\_\_\_\_  
Agency Name

Agency Address City State Zip

Arresting Law Enforcement Agency Phone Number: \_\_\_\_\_

Date of Arrest: \_\_\_\_\_ Were you handcuffed? \_\_\_\_\_ Transported in patrol car? \_\_\_\_\_

Was original charge reduced later? \_\_\_\_\_ If so, what was final charge? \_\_\_\_\_

What was final disposition of charge? (fines/probation/charges dismissed/community service, etc) Also give date of final disposition. \_\_\_\_\_

**G. Original Charge** (What were you arrested for?) \_\_\_\_\_

Arresting Law Enforcement Agency and their address: \_\_\_\_\_  
Agency Name

Agency Address City State Zip

Arresting Law Enforcement Agency Phone Number: \_\_\_\_\_

Date of Arrest: \_\_\_\_\_ Were you handcuffed? \_\_\_\_\_ Transported in patrol car? \_\_\_\_\_

Was original charge reduced later? \_\_\_\_\_ If so, what was final charge? \_\_\_\_\_

What was final disposition of charge? (fines/probation/charges dismissed/community service, etc) Also give date of final disposition. \_\_\_\_\_

**H. Original Charge** (What were you arrested for?) \_\_\_\_\_

Arresting Law Enforcement Agency and their address: \_\_\_\_\_

Agency Name

Agency Address City State Zip

Arresting Law Enforcement Agency Phone Number: \_\_\_\_\_

Date of Arrest: \_\_\_\_\_ Were you handcuffed? \_\_\_\_\_ Transported in patrol car? \_\_\_\_\_

Was original charge reduced later? \_\_\_\_\_ If so, what was final charge? \_\_\_\_\_

What was final disposition of charge? (fines/probation/charges dismissed/community service, etc) Also give date of final disposition. \_\_\_\_\_

**I. Original Charge** (What were you arrested for?) \_\_\_\_\_

Arresting Law Enforcement Agency and their address: \_\_\_\_\_

Agency Name

Agency Address City State Zip

Arresting Law Enforcement Agency Phone Number: \_\_\_\_\_

Date of Arrest: \_\_\_\_\_ Were you handcuffed? \_\_\_\_\_ Transported in patrol car? \_\_\_\_\_

Was original charge reduced later? \_\_\_\_\_ If so, what was final charge? \_\_\_\_\_

What was final disposition of charge? (fines/probation/charges dismissed/community service, etc) Also give date of final disposition. \_\_\_\_\_

**J. Original Charge** (What were you arrested for?) \_\_\_\_\_

Arresting Law Enforcement Agency and their address: \_\_\_\_\_

Agency Name

Agency Address City State Zip

Arresting Law Enforcement Agency Phone Number: \_\_\_\_\_

Date of Arrest: \_\_\_\_\_ Were you handcuffed? \_\_\_\_\_ Transported in patrol car? \_\_\_\_\_

Was original charge reduced later? \_\_\_\_\_ If so, what was final charge? \_\_\_\_\_

What was final disposition of charge? (fines/probation/charges dismissed/community service, etc) Also give date of final disposition. \_\_\_\_\_

## DRUGS AND ALCOHOL

1. Yes ☐ No ☐ Have you ever used **ANY** illegal drugs, narcotics or marijuana? If yes, fill out the information below. On number of times, list an actual number and on the date and age of last use, **DO NOT list "High School"**. List an actual date and age.

Drug	Number of times used:	Date of last use and age at last use:
Marijuana		
Cocaine		
Crack		
Speed		
Acid		
Downers		
Heroin		
THC/STP		
Mescaline		
Morphine		
Codeine		
Hash		
Peyote		
Mushrooms		
Other (Name)		
Other (Name)		
Other (Name)		

How would you describe your alcohol consumption?

☐ Don't drink at all   ☐ Special Occasions Only   ☐ Weekends   ☐ Daily   ☐ No Regularity

How often do you drink alcohol? \_\_\_\_\_ What alcohol do you usually drink? \_\_\_\_\_

When were you last drunk? \_\_\_\_\_ How often do you get drunk? \_\_\_\_\_

## APPLICATIONS TO LAW ENFORCEMENT AGENCIES

Yes ☐ No ☐ Have you **ever** applied to **any** law enforcement agency (city, county, state or federal)? If so, fill out the information below listing **each** time you applied.

(1) Name of Agency: \_\_\_\_\_ Date Applied: \_\_\_\_\_  
 Agency Address: \_\_\_\_\_  
                                 Number                Street  
                                 \_\_\_\_\_  
                                 City                                State                                Zip  
 Background Investigator Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Investigator Email: \_\_\_\_\_ Position Applied For: \_\_\_\_\_

Check each step in the process that you completed, and your status:

☐ Application    ☐ Written Exam    ☐ Physical Agility    ☐ Background    ☐ Oral Board  
☐ Polygraph    ☐ Chief's Interview    ☐ Conditional Job Offer    ☐ Psychological    ☐ Medical

STATUS: ☐ Hired    ☐ On List    ☐ Withdrawn    ☐ Disqualified (If so, explain why below)

Disqualification reason: \_\_\_\_\_

---

(2) Name of Agency: \_\_\_\_\_ Date Applied: \_\_\_\_\_  
 Agency Address: \_\_\_\_\_  
                                 Number                Street  
                                 \_\_\_\_\_  
                                 City                                State                                Zip  
 Background Investigator Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Investigator Email: \_\_\_\_\_ Position Applied For: \_\_\_\_\_

Check each step in the process that you completed, and your status:

☐ Application    ☐ Written Exam    ☐ Physical Agility    ☐ Background    ☐ Oral Board  
☐ Polygraph    ☐ Chief's Interview    ☐ Conditional Job Offer    ☐ Psychological    ☐ Medical

STATUS: ☐ Hired    ☐ On List    ☐ Withdrawn    ☐ Disqualified (If so, explain why below)

Disqualification reason: \_\_\_\_\_

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(3) Name of Agency: \_\_\_\_\_ Date Applied: \_\_\_\_\_  
 Agency Address: \_\_\_\_\_  
                                 Number                Street  
                                 \_\_\_\_\_  
                                 City                                State                                Zip  
 Background Investigator Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Investigator Email: \_\_\_\_\_ Position Applied For: \_\_\_\_\_

Check each step in the process that you completed, and your status:

☐ Application    ☐ Written Exam    ☐ Physical Agility    ☐ Background    ☐ Oral Board  
☐ Polygraph    ☐ Chief's Interview    ☐ Conditional Job Offer    ☐ Psychological    ☐ Medical

STATUS: ☐ Hired    ☐ On List    ☐ Withdrawn    ☐ Disqualified (If so, explain why below)

Disqualification reason: \_\_\_\_\_  
(4) Name of Agency: \_\_\_\_\_ Date Applied: \_\_\_\_\_  
Agency Address: \_\_\_\_\_

Number Street

City State Zip

Background Investigator Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Investigator Email: \_\_\_\_\_ Position Applied For: \_\_\_\_\_

Check each step in the process that you completed, and your status:

☐ Application ☐ Written Exam ☐ Physical Agility ☐ Background ☐ Oral Board  
☐ Polygraph ☐ Chief's Interview ☐ Conditional Job Offer ☐ Psychological ☐ Medical

STATUS: ☐ Hired ☐ On List ☐ Withdrawn ☐ Disqualified (If so, explain why below)

Disqualification reason: \_\_\_\_\_

(5) Name of Agency: \_\_\_\_\_ Date Applied: \_\_\_\_\_  
Agency Address: \_\_\_\_\_

Number Street

City State Zip

Background Investigator Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Investigator Email: \_\_\_\_\_ Position Applied For: \_\_\_\_\_

Check each step in the process that you completed, and your status:

☐ Application ☐ Written Exam ☐ Physical Agility ☐ Background ☐ Oral Board  
☐ Polygraph ☐ Chief's Interview ☐ Conditional Job Offer ☐ Psychological ☐ Medical

STATUS: ☐ Hired ☐ On List ☐ Withdrawn ☐ Disqualified (If so, explain why below)

Disqualification reason: \_\_\_\_\_

(6) Name of Agency: \_\_\_\_\_ Date Applied: \_\_\_\_\_  
Agency Address: \_\_\_\_\_

Number Street

City State Zip

Background Investigator Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Investigator Email: \_\_\_\_\_ Position Applied For: \_\_\_\_\_

Check each step in the process that you completed, and your status:

☐ Application ☐ Written Exam ☐ Physical Agility ☐ Background ☐ Oral Board  
☐ Polygraph ☐ Chief's Interview ☐ Conditional Job Offer ☐ Psychological ☐ Medical

STATUS: ☐ Hired ☐ On List ☐ Withdrawn ☐ Disqualified (If so, explain why below)

Disqualification reason: \_\_\_\_\_

## MISCELLANEOUS QUESTIONS

1. Have you ever taken a polygraph?..... Yes ☐ No ☐  
If so, how many, why and dates taken: \_\_\_\_\_
2. Did you fill out your application and all other documents requested as accurately and completely as you could at the time you filled them out? .....Yes ☐ No ☐  
If not, explain in detail: \_\_\_\_\_
3. Did you deliberately falsify or withhold any information requested?.....Yes ☐ No ☐  
If yes, explain in detail: \_\_\_\_\_
4. Did you include all past employers that were asked for?.....Yes ☐ No ☐  
If not, explain: \_\_\_\_\_
5. Have you ever walked off of a job or quit without giving the requested or required notice?.....Yes ☐ No ☐  
If so, give dates/explain: \_\_\_\_\_
6. Have you ever been fired from **any** job?..... Yes ☐ No ☐  
If yes, give dates/explain: \_\_\_\_\_
7. Have you ever been asked to resign a position from any job?..... Yes ☐ No ☐  
If yes, give dates/ explain: \_\_\_\_\_
8. Have you ever quit or resigned a position rather than be fired or forcibly terminated for cause? ..... Yes ☐ No ☐  
If yes, give dates/ explain: \_\_\_\_\_
9. Did you give the real reasons on your application for leaving the former employers that you listed?..... Yes ☐ No ☐  
If not, explain: \_\_\_\_\_
10. Are there any of your past employers that would give you a poor employment reference based on performance? ..... Yes ☐ No ☐  
If yes, explain which ones and why: \_\_\_\_\_
11. Have you ever filed a lawsuit or administrative claim against a former employer for any reason?..... Yes ☐ No ☐  
If so, explain in detail who and why: \_\_\_\_\_
12. Have you ever falsified any payroll records or timecards?..... Yes ☐ No ☐  
If yes, give dates/ explain: \_\_\_\_\_
13. Have you had any wage or tax garnishments in the past for any reason?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_



14. Have you ever been rejected for employment by any law enforcement agency in the past?..... Yes ☐ No ☐  
If so, give dates/explain: \_\_\_\_\_
15. Have you ever been disciplined by an employer in the past for failure to follow orders or policies?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
16. Have you ever failed to report for work or called in “sick” when you were not actually ill nor caring for a sick family member?..... Yes ☐ No ☐  
If so, how many times, dates and explain why: \_\_\_\_\_
17. Have you ever stolen anything from a former employer?..... Yes ☐ No ☐  
If so, list all items you have ever stolen, date, from whom and the approximate value of each item. \_\_\_\_\_
18. Have you ever been disciplined, reprimanded or counseled at any job for any reason?..... Yes ☐ No ☐  
If so, give dates and explain in detail: \_\_\_\_\_
19. Have you ever damaged an employer’s property for revenge?.....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
20. Have you ever failed to report for work without contacting your employer... Yes ☐ No ☐  
If so, explain how many times, dates and why: \_\_\_\_\_
21. Have you ever been told that your job assignment was being changed due to problems you were having in completing your duties?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
22. Have you ever claimed to be injured or disabled when you were not?.....Yes ☐ No ☐  
If so, give dates and explain in detail: \_\_\_\_\_
23. Have you ever filed a complaint against an employer?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
24. Have you ever walked off of a job because you were angry?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
25. Have you ever walked off of a job because of pressure?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
26. Have you ever received a “less than satisfactory” job performance evaluation?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
27. Have you ever been reprimanded for reporting late to work?.....Yes ☐ No ☐  
If so, how many times, dates and explain: \_\_\_\_\_
28. Have you ever knowingly violated a company policy?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_

29. Have you ever claimed that you worked more hours than you actually worked?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
30. Have you ever consumed alcoholic beverages at work?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
31. Have you ever consumed any form of an illegal substance at work?.....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
32. Have you ever committed an undetected act while working, which if detected would result in disciplinary action?.....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
33. Are you seeking employment in law enforcement so as to gain access to confidential information?..... Yes ☐ No ☐  
If so, explain: \_\_\_\_\_
34. Have you released any confidential information to any unauthorized persons in the past?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
35. Can you be employed in law enforcement and maintain confidentiality? .....Yes ☐ No ☐  
If not, explain: \_\_\_\_\_
36. Is there anything else in your past personal history that, if investigated, would be harmful or detrimental to you or to this agency?..... Yes ☐ No ☐  
If so, give dates and explain in detail:\_\_\_\_\_
37. Have the police ever been called to **any** residence of yours?..... Yes ☐ No ☐  
If so, how many times, dates, who called and why? \_\_\_\_\_  
\_\_\_\_\_
38. If you answered yes to the above question (37), was a police report ever made?..... Yes ☐ No ☐  
If so, explain and include agency and report number: \_\_\_\_\_  
\_\_\_\_\_
39. Have the police ever been called to come to **any** location where you were located?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
40. Have you ever had any Internal Affairs investigations involving yourself?..... Yes ☐ No ☐  
If so, give dates and explain in detail and include disposition of investigation:\_\_\_\_\_
41. Have you ever been fingerprinted for any reason?..... Yes ☐ No ☐  
If so, list each time and reason: \_\_\_\_\_

42. Have you ever had any repossession or collection action taken against you?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
43. Have you ever had any legal judgments or other garnishments against you?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
44. Have you ever been refused automobile insurance?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
45. Have you ever had any delinquent credit?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_  
\_\_\_\_\_
46. In your opinion, do you have good credit at this time?..... Yes ☐ No ☐
47. Have you ever considered filing for bankruptcy?..... Yes ☐ No ☐
48. Have you ever been refused credit from a bank?..... Yes ☐ No ☐
49. Have you ever been refused credit from a store?..... Yes ☐ No ☐
50. Have you ever used a prescription prescribed to someone else?..... Yes ☐ No ☐  
If so, explain in detail, (i.e., what was prescription, who was it prescribed to, how many times did you take it, dates you took it and why did you take it): \_\_\_\_\_  
\_\_\_\_\_
51. Have you ever transported or made the arrangements for the illegal sale or transfer of any illegal drugs, narcotics or marijuana? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
52. Have you ever sold or given away illegal drugs, narcotics or marijuana?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
53. Have you ever worked under the influence of any drug, narcotic or marijuana?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
54. Have you ever had any illegal drug, narcotic or marijuana with you at work for any reason? ..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
55. Has any illegal drug, narcotic or marijuana use ever interfered with your work in any way such as making you late to work or unable to work?.....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_

56. Have you ever driven a vehicle/boat after you had been drinking an alcoholic beverage? ..... Yes ☐ No ☐  
If so, how many times, dates and explain in detail \_\_\_\_\_  
\_\_\_\_\_

57. Have you ever driven a vehicle/boat when, in your opinion you should not have, or when you felt you intoxicated, due to the introduction of alcohol into your system?.....Yes ☐ No ☐  
If so, explain in detail, i.e. how many times, dates and how much did you have to drink:  
\_\_\_\_\_  
\_\_\_\_\_

When was the last time and how much did you have to drink? \_\_\_\_\_  
\_\_\_\_\_

58. Have you ever driven a vehicle/boat while you were under the influence of an illegal drug, narcotic or controlled substance (legal or not)? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_  
When was the last time and what were you under the influence of? \_\_\_\_\_  
\_\_\_\_\_

59. Have you ever been involved in an accident in a vehicle or boat after you had been drinking an alcoholic beverage?..... Yes ☐ No ☐  
If so, give dates and explain in detail: \_\_\_\_\_

60. Have you ever been involved in an accident in a vehicle or boat while you were under the influence of a narcotic (legal or not)?..... Yes ☐ No ☐  
If so, give dates and explain in detail: \_\_\_\_\_

61. If you answered Yes to either question 59 or 60 above, was law enforcement notified and was a report taken? .....Yes ☐ No ☐  
If so, provide information about agency and report number \_\_\_\_\_  
If not, why was accident not reported? \_\_\_\_\_  
\_\_\_\_\_

62. Have you ever grown marijuana?..... Yes ☐ No ☐  
If so, explain in detail (i.e., how much, dates, where and was it for personal use or sale): \_\_\_\_\_  
\_\_\_\_\_

63. Have you ever had an illegal injection? .....Yes ☐ No ☐  
If so, give dates and explain in detail: \_\_\_\_\_

64. Have you ever lied to a doctor in order to obtain prescriptions such as valium or pain killers?..... Yes ☐ No ☐  
If so, give dates and explain in detail: \_\_\_\_\_

65. Have you ever been in a physical confrontation after consuming alcohol?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_

66. Have you ever consumed alcohol and blacked out?..... Yes ☐ No ☐  
If so, how many times, give dates and explain: \_\_\_\_\_

67. Have you ever forged a prescription for drugs or knowingly given a  
forged prescription for drugs?..... Yes ☐ No ☐  
If so, give dates and explain in detail: \_\_\_\_\_

68. Have you ever falsified a urine or blood test for drugs? .....Yes ☐ No ☐  
If so, give dates and explain in detail: \_\_\_\_\_

69. Have you ever forged another person's signature on a check  
or other documents with the purpose to defraud anyone? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_

70. Have you ever illegally used a credit card?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_

71. Have you ever deliberately and knowingly falsified any record, report or  
document for your own personal gain or to defraud anyone?.....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_

72. Have you ever been involved in any fraudulent stock, bond or security  
transactions? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_

73. Have you ever falsified or manipulated any medical records or any other medical  
documents? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_

74. Have you ever transported, concealed or had any illegal involvement  
with any of the following:..... Yes ☐ No ☐  
If so, indicate which one(s) and explain below.

- ☐ Illegal Aliens
- ☐ Stolen Vehicles
- ☐ Prostitutes/Child Pornography
- ☐ Endangered Fowl/Animal/Artifact
- ☐ Illegal Vegetation
- ☐ Illegal Auto/Aircraft parts/Boat parts
- ☐ Alcohol/Tobacco/Narcotics/Firearms
- ☐ Narcotic Apparatus/Chemicals
- ☐ Hazardous Chemicals or Materials
- ☐ Other Contraband

Explain in detail and give dates: \_\_\_\_\_  
\_\_\_\_\_

75. Have you ever transported any of the above listed (question 74) across state or  
country boundaries? ..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_

76. Have you ever been offered a bribe or payoff? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
77. Have you ever solicited or accepted a bribe? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
78. Are you now, or have you ever been associated in any way with  
organized criminal conduct?.....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
79. Have you ever filed for or received any money or benefit from a false  
insurance claim?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
80. Have you ever falsified an expense account?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
81. Have you ever been in possession of any illegal weapons (restricted or  
fully automatic)?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
82. Have you ever been in possession of any illegal explosives or detonation  
devices? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
83. Have you ever been involved in any subversive or terroristic activities or  
affiliations? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
84. Do you advocate the violent overthrow of the present system of  
government in this state of the United States? ..... Yes ☐ No ☐  
If so, explain: \_\_\_\_\_
85. Have you ever altered or removed the serial numbers or identification  
numbers from any property?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
86. Have you ever stolen the services of a utility (gas, water, power, phone)  
or cable/satellite service? ..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
87. Have you ever obtained unemployment/welfare funds or food stamps  
illegally?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
88. Have you ever been a member or solicitor of an illegal organization or  
gang?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
89. Have you ever lied under oath in court? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_

90. Have you ever falsified a Notary oath?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_

91. Have you ever counterfeited any money, coin, document or property  
(criminal simulation)? ..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_

92. Have you ever possessed, transported, sold, held or manufactured any of  
the following?..... Yes ☐ No ☐  
If so, indicate which one(s) and explain below.

- ☐ Automatic Weapons
- ☐ Explosives/Devices
- ☐ Silencers
- ☐ Illegal Firearm(s)
- ☐ Illegal Weapon(s)
- ☐ Incendiary Device
- ☐ Armor Piercing Ammunition
- ☐ Hazardous Materials/Chemicals

Explain and give dates: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

93. Have you ever made a false bomb threat? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_

94. Have you ever been involved in trade secret fraud (sales, exchange or  
extortion)? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_

95. Are you now on parole, probation or out of jail on bond awaiting an  
appeal on a felony conviction?..... Yes ☐ No ☐  
If so, explain in detail: \_\_\_\_\_

96. Do you have any criminal or civil court cases now pending against you  
for any reason? .....Yes ☐ No ☐  
If so, explain in detail: \_\_\_\_\_

97. Have you committed any major crime within the past  
ten (10) years? ..... Yes ☐ No ☐  
If so, give dates and explain in detail: \_\_\_\_\_

98. Do you have a regular habit of gambling or betting?..... Yes ☐ No ☐  
If so, explain: \_\_\_\_\_

99. Have you ever been involved in any illegal gambling? ..... Yes ☐ No ☐  
If so, explain: \_\_\_\_\_

100. Do you have any outstanding gambling debts?..... Yes ☐ No ☐  
If so, explain: \_\_\_\_\_
101. Have you ever broken into or attempted to break into any coin operated machine to take the money inside? ..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
102. Have you ever stolen anything?.....Yes ☐ No ☐  
If so, give dates and explain in detail: \_\_\_\_\_
103. Have you ever shoplifted anything? .....Yes ☐ No ☐  
If so, give dates and explain in detail: \_\_\_\_\_
104. Have you ever used someone else's information, or computer to steal or order items on the Internet that you never paid for? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
105. Could you arrest a close friend or family member for a violation of the law? .....Yes ☐ No ☐  
If not explain why: \_\_\_\_\_
106. Have you or your spouse/boyfriend/girlfriend/roommate ever been involved in any civil or criminal court action? .....Yes ☐ No ☐  
If so, give dates and explain in detail: \_\_\_\_\_
107. Has your spouse/boyfriend/girlfriend/roommate ever been arrested? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
108. Have you ever attempted by word or action to cause anyone to believe that you were a police officer other than when employed as a certified officer? .....Yes ☐ No ☐  
If so, give dates and explain in detail: \_\_\_\_\_
109. Have you ever run from or attempted to elude a police officer either on foot or in a vehicle?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
110. Have you ever illegally entered onto or into a property, house, building or vehicle of another when you did not have permission to do so?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
111. Have you ever assaulted (struck, pushed or hit) anyone, including a family member, roommate or partner? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
112. Have you ever requested, suggested or received money or anything of value from a person as a gift to thank you for your protection or for not harassing or hurting them? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_



113. Have you ever viewed, purchased, possessed, manufactured or distributed child pornography?..... Yes ☐ No ☐  
If so, give dates and explain in detail: \_\_\_\_\_
114. Have you ever owned, operated or participated in the operation of a “website” that depicted child pornography, nudity and/or sexual acts?..... Yes ☐ No ☐  
If so, give dates and explain in detail: \_\_\_\_\_
115. Have you ever purchased, sold or furnished any alcoholic beverage to a person that you knew to be under 21 years of age?.....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
116. Have you ever committed any criminal mischief offenses?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
117. Have you ever entered a house or building without the consent of the owner with the intent of hurting someone or stealing any property?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
118. Have you ever used a vehicle without the permission of the owner?.....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
119. Have you ever changed or altered the price tags on any merchandise?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
120. Have you ever committed any criminal act that went undetected by any law enforcement agency?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
121. Have you ever been present when someone committed a crime? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
122. Have you ever been a member of any street gang?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
123. Have you ever bought, sold, traded or possessed erotic images of children? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
124. Have you ever taken erotic pictures of children? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
125. Have you ever viewed images of child pornography on the internet?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_

126. Have you ever set any item, regardless of ownership or value, on fire:  
for personal reasons, profit, revenge, self-gratification,  
pleasure or fun?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
127. Have you ever or are you currently friends with anyone that  
is a felon? ..... Yes ☐ No ☐  
If so, explain: \_\_\_\_\_
128. Have you ever lived with a felon?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
129. Do you have any personal contacts, family or friends that are involved in  
any criminal activities now?..... Yes ☐ No ☐  
If so, explain: \_\_\_\_\_
130. Have you ever bought anything that you suspected was stolen?..... Yes ☐ No ☐  
If so, give dates and explain in detail: \_\_\_\_\_
131. Do you currently possess any property that you believe may have been  
stolen?..... Yes ☐ No ☐  
If so, explain in detail: \_\_\_\_\_
132. Have you ever been a paid or unpaid police informant? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
133. Have you ever failed to file income tax or cheated/lie on an income  
tax form? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
134. Have you ever had an employment bond refused? ..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
135. Have you ever avoided paying any lawful debt by moving away?..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
136. Have you ever defaulted on (failed to pay) a loan, including a  
student loan? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
137. Have you ever borrowed money to pay for a gambling debt? ..... Yes ☐ No ☐  
If so, how much did you owe for gambling? \_\_\_\_\_  
Explain the circumstances including dates: \_\_\_\_\_
138. Do you currently have any outstanding debts as a result of  
gambling? .....Yes ☐ No ☐  
If so, explain: \_\_\_\_\_
139. Have you ever spent money for illegal purposes (e.g., illegal drugs,  
prostitution, purchase of fraudulent documents, etc.)? ..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_

140. Have you ever failed to make or been late on a court-ordered payment (e.g., child support, alimony, restitution, etc.)? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
141. Have you ever written three or more bad checks in a one year period?.....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_
142. Are you in arrears on court ordered child support? .....Yes ☐ No ☐  
If so, how much do you owe in back child support? \_\_\_\_\_  
Explain circumstances: \_\_\_\_\_
143. What are your hobbies or other interests away from work? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
144. If you personally know any police officers, list them here and include their agency and a phone number. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
145. Was this Personal History Statement filled out by you, the applicant, in your own handwriting? .....Yes ☐ No ☐  
If not, explain why: \_\_\_\_\_
146. Have you ever sexually fondled or been accused of sexually fondling a child or minor, no matter what your age? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_  
\_\_\_\_\_
147. Have you ever sexually abused, or been accused of sexually abusing a child or minor, no matter what your age? .....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_  
\_\_\_\_\_
148. Have you ever exposed your genitals to another person in a public place? Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_  
\_\_\_\_\_
149. Have you ever been a participant in any sexual act with an animal?.....Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_  
\_\_\_\_\_

150. Have you ever forced anyone to have sexual intercourse with you against their will?  
..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_  
\_\_\_\_\_

151. Have you ever forced anyone to commit a sexual act? ..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_  
\_\_\_\_\_

152. Have you ever engaged in a sexual act for money or some other form of payment?  
..... Yes ☐ No ☐  
If so, give dates and explain: \_\_\_\_\_  
\_\_\_\_\_

153. Have you ever enjoyed see another person suffer?..... Yes ☐ No ☐  
If so, explain: \_\_\_\_\_  
\_\_\_\_\_

154. Does the thought of working alone bother you? ..... Yes ☐ No ☐  
If so explain: \_\_\_\_\_

155. Do you believe you could use physical force in the line of duty? ..... Yes ☐ No ☐  
If not, explain: \_\_\_\_\_  
\_\_\_\_\_

156. Have you ever been in a physical fight? ..... Yes ☐ No ☐  
If so, how many times? \_\_\_\_\_  
Give dates and explain: \_\_\_\_\_  
\_\_\_\_\_

157. If it becomes necessary, could you defend yourself or another person even if  
it meant taking a human life in the performance of your duties? Yes ☐ No ☐  
.....

158. Is there anything that would prevent you from fully performing your duties as a police officer  
including working on weekends, evenings, nights and holidays? Yes ☐ No ☐

**I HEREBY CERTIFY THAT THERE ARE NO WILLFUL MISREPRESENTATIONS,  
OMISSIONS, OR FALSIFICATIONS IN THE FOREGOING STATEMENTS AND ANSWERS  
TO QUESTIONS.**

**I AM FULLY AWARE THAT ANY SUCH MISREPRESENTATIONS, OMISSIONS OR  
FALSIFICATIONS WILL BE GROUNDS FOR IMMEDIATE REJECTION OF MY  
APPLICATION, OR IF HIRED, TERMINATION OF MY EMPLOYMENT.**

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

## SEGUIN POLICE DEPARTMENT

### **AUTHORITY TO RELEASE INFORMATION**

#### TO WHOM IT MAY CONCERN:

I hereby authorize the **Seguin Police Department** and its authorized representatives bearing this release, or a copy thereof, within one year of its date, to obtain any information in your files pertaining to my employment, military, credit, education or medical records including and not limited to academic, achievement, attendance, athletic, personal history, and disciplinary records, medical records, and credit records.

I hereby direct you to release such information upon request of the bearer. This release is executed with full knowledge and understanding that the information is for official use. Consent is granted to all parties for furnish such information, as described above, to third parties in the course of fulfilling its official responsibilities. I hereby release you, as custodian of such records, and any school, college, university, or other educational institution, hospital, or other repository of medical records, credit bureau, lending institution, consumer reporting agency, or retail business establishment including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or attempt to comply with it.

I am furnishing my Social Security Account Number on a voluntary basis with the understanding such is not required by any law or regulation. I have been advised that all parties will utilize this number only to facilitate the location of employment, military, credit, and educational records concerning me in connection with this application. Should there be any question as to the validity of this release, you may contact me as indicated below:

Applicant's Printed Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number (include area code): \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Applicant's Notarized Signature: \_\_\_\_\_

Sworn to and signed by me, on this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in and for \_\_\_\_\_ County, in the State of \_\_\_\_\_.

NOTARY SEAL

Signature of Notary Public: \_\_\_\_\_

Printed Name of Notary Public: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

## Pre-Employment Inquiry Release

In connection with my application for employment (including contract for services) with:

### City of Seguin Police Department

I understand that investigative background inquiries are to be made on myself, including criminal convictions check (misdemeanor and felony), educational verification, and motor vehicle (driving records) claims. These reports will include information as to my character, work habits, performance and experience, along with reasons for termination of past employment from previous employers. Further, I understand that you may be requesting information from various Federal and State agencies, as well as private companies, which maintain records concerning my past activities relating to my driving, criminal/civil background, and other experiences. I authorize, without reservation, any contact of these agencies, companies, or employers to furnish the above-mentioned information, current or previous.

I hereby consent to your obtaining the above information from these agencies, companies, or employers by the Police Department or any person, company, or agency designated by the Department to perform investigative background inquiries. I hereby agree to release the City of Seguin and its agents from any liability resulting from the conduct of a pre-employment inquiry related to me. I further agree not to file any type of lawsuit against the City of Seguin or its agents arising from the information obtained from this background search.

**Clearly print** the following information:

NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

DRIVER'S LICENSE # \_\_\_\_\_ SOC SEC # \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_

CITY/STATE/ZIP CODE \_\_\_\_\_

UNIVERSITY ATTENDED: \_\_\_\_\_ CITY/STATE \_\_\_\_\_

DATE ATTENDED: FROM \_\_\_\_\_ TO \_\_\_\_\_

MAJOR \_\_\_\_\_ PHONE NO. \_\_\_\_\_

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PROSPECTIVE EMPLOYER: City of Seguin

#### REPORTS REQUESTED

\*Criminal Records

\*Previous Employment Verification

\*Education Verification

\*Social Security Verification

\*Driving Record

\*Other

CITY OF SEGUIN  
**FAIR CREDIT REPORTING ACT**  
**APPLICANT NOTICE AND AUTHORIZATION**

I understand and agree that the City of Seguin may obtain a consumer report and/or investigative consumer report in connection with my application for employment and/or for purposes of continued employment, promotions, transfers, etc. A “consumer report” is any written, oral, or other communication of any information by a consumer reporting agency bearing on my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living. An “investigative consumer report” is a consumer report based on information obtained through interviews with neighbors, friends or others who have knowledge of me. Specific examples of background information the City may obtain include criminal history checks, identification and social security number checks, education verifications, employment verifications, reference checks, credit history, and driver’s license records.

I acknowledge that I have the right to make a written request to the City of Seguin within a reasonable period of time to receive additional information about the nature and scope of any investigative consumer report.

If I am denied employment, or if hired, denied continued employment, a promotion, transfer, etc. either wholly or partly, because of information contained in a consumer report, the City will notify me and provide me with the name, address, and telephone number of the agency that prepared the report. I will also receive a copy of the report and a statement of consumer rights under the Fair Credit Reporting Act.

*I have read the above notice and understand what it means. I hereby authorize the City of Seguin to obtain a consumer report(s) and/or an investigative consumer report(s) for employment purposes. I further authorize the appropriate individuals, companies, institutional or agencies, including consumer reporting agencies, to release such information to the City.*

Name (Please Print) \_\_\_\_\_

Past/Other Names Used \_\_\_\_\_

Social Security No. \_\_\_\_\_ Date of Birth \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Notice to Applicants: The City of Seguin will not consider your application for employment if this Notice and Authorization form is not completed, signed, and timely returned to the Human Resources Department along with your application for employment.**

## Additional Information

[illegible]



## Additional Information

[illegible]

## Additional Information

[illegible]

## Additional Information

[illegible]

## Additional Information

[illegible]